.Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(571) 273-2885 or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as

| INTERIOR ICE DOLLINGS   |   |  | specifying a new c   | orrespondence addre   | ss; and/or (b)   | indicating a sep  | arate "FEE ADDRESS" for  | r<br>r                |
|---|---|--|--|---|--|---|--|-----------------------|
| CURRENT CORRESPONDEN  | CE ADDRESS (Note: Use Block I for   | any change of address)   | The state of the s | Note: A certificate   | of mailing ca  | in only be used f   | or domestic mailings of th   | e                     |
| 7.  | 590 01/04/2006  | / 6  | 3.25   | Fee(s) Transmittal. papers. Each addition have its own certific                                 | This certificat<br>mal paper, su<br>ate of mailing         | e cannot be used<br>ch as an assignm<br>or transmission.  | or domestic mailings of the<br>for any other accompanying<br>ent or formal drawing, mus                      | B<br>it               |
| Pamela S. Smith   |   | 1  | 9.7 200c   | •   | ertificate of  | Mailing or Tran   | emierion   |                       |
| Southwest Airlines<br>2702 Love Field D<br>Dallas, TX 75235   |   |  | 2 1 2000   | I hereby certify that<br>States Postal Service<br>addressed to the M<br>transmitted to the US   | this Fee(s) T<br>e with suffici-<br>lail Stop ISS          | ransmittal is being the postage for full being the postage for full being the postage for the postage and the postage for the | g deposited with the Uniterst class mail in an envelope above, or being facsimile tale industried below.     | d<br>e<br>e           |
| 5011w, 171 1555   |   | S TRI  | ADEMARK OF   | Ç ac  | . / /  | Revigen   | (Depositor's name)   | 1                     |
|   |   |  |  | 6   | <u> </u>   | 8   | (Signature)  | ď                     |
|   |   |  |  | Marc  | k 24.  | 2006  | (Date)   | ]                     |
| APPLICATION NO.   | FILING DATE   | F  | IRST NAMED INVEN   | TOR   | ATTORNE  | EY DOCKET NO.   | CONFIRMATION NO.   | ĺ                     |
| 10/643,462  | 08/19/2003  | Arthur J. Allison  |  |   | SW   | SWA-30140 4137  |  |                       |
| TITLE OF INVENTION: M   | IOBILE DATA READING   | SYSTEM   |  |   |  |   |  |                       |
| APPLN. TYPE   | SMALL ENTITY  | ISSUE FE   | E PL   | BLICATION FEE   | TOTAL  | . FEE(S) DUE  | DATE DUE   | 1                     |
| nonprovisional  | NO  | \$1400   |  | \$300   |  | \$1700  | 04/04/2006   | ,                     |
| EXAMINER  |   | ART UNI  | T CL   | ASS-SUBCLASS  | _]   |   |  |                       |
| ST CYR,   | DANIEL  | 2876   |  | 235-385000  |  |   |  |                       |
| 1. Change of correspondence<br>CFR 1.363).  | e address or indication of "F   | ee Address" (37  |  | he patent front page,   |  |   |  | -                     |
|   | lence address (or Change of<br>22) attached.  | Correspondence   | or agents OR, alter  | • •   | -  |   | K. Bergen<br>a S. Smith  |                       |
| "Fee Address" indicat   | ion (or "Fee Address" Indica<br>or more recent) attached. Use   | ion form registered attorney or seprit and the name of the to                          |  |   |  |   |  |                       |
| 3. ASSIGNEE NAME AND  | RESIDENCE DATA TO B   | E PRINTED ON TI  | HE PATENT (print o   | r type)   |  |   |  | •                     |
| PLEASE NOTE: Unless recordation as set forth in   | an assignee is identified be<br>37 CFR 3.11. Completion   | clow, no assignee d<br>of this form is NOT   | ata will appear on the a substitute for filing   | ne patent. If an assig<br>an assignment.  | gnee is identi   | fied below, the d   | locument has been filed for  | 7.50                  |
| (A) NAME OF ASSIGNI   |   |  |  | Y and STATE OR CO   | I 03/2<br>OUNTRY)  | 8\500P BURK   | HHHZ VVVVVV4V 1V64.  | 3962<br>1400.00 OP    |
| 01 FC:1501<br>02 FC:1504<br>Southwest Airlines Co. Dallas, Texas03 FC:8001  |   |  |  |   |  |   |  | 300.00 OP<br>30.00 OP |
| Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 🔲 Government   |   |  |  |   |  |   |  |                       |
| a. The following fee(s) are   | enclosed:   | _  | Payment of Fee(s):   |   | 1  |   |  | ,                     |
| ☐ Issue Fee ☐ A check in the amount of the fee(s) is enclosed.  |   |  |  |   |  |   |  |                       |
| Publication Fee (No small entity discount permitted)  Advance Order - # of Copies 10  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1899 (enclose an extra copy of this form). |   |  |  |   |  |   |  |                       |
|   |   | `  | Deposit Account Nur  | nber 50-18  | charge the re  | equired fee(s), or<br>enclose an extra c  | credit any overpayment, to<br>opy of this form).   | i                     |
|   | (from status indicated above MALL ENTITY status. See :  | )  |  |   | <del>121_11</del>  |   |  | ı                     |
|   |   |  | o. Applicant is no   | longer claiming SMA   | ALL ENTITY   | status. See 37 C  | FR 1.27(g)(2).   |                       |
| NOTE: The Issue Fee and Punterest as shown by the reco  | is requested to apply the Issu<br>obligation Fee (if required) with<br>rds of the United States Pate                      | ill not be accepted<br>at eacl Trademark   | from anyone other th   | re-apply any previou<br>an the applicant; a re  | sly paid issue<br>gistered attor                           | ice to the applicancy or agent; or the  | ition identified above.<br>ne assignee or other party in   |                       |
| Authorized Signature  | ~~\/  | 8/ -   |  | Date M  | arch   | 24, 200   | 6  |                       |
| Typed or printed name Grady K. Bergen Registration No. 37,587   |   |  |  |   |  |   |  |                       |
| his collection of information application. Confidentialing ubmitting the completed applications form and/or suggestions.  | n is required by 37 CFR 1.3<br>by is governed by 35 U.S.C.<br>plication form to the USPT(<br>for reducing this burden, sh | 11. The information<br>122 and 37 CFR 1.<br>D. Time will vary d<br>ould be sent to the | is required to obtain<br>14. This collection is<br>epending upon the in<br>Chief Information O   | or retain a benefit by<br>sestimated to take 12<br>ndividual case. Any officer, U.S. Patent and | the public w<br>minutes to c<br>comments on<br>d Trademark | hich is to file (and<br>omplete, includin<br>the amount of the<br>Office, U.S. Dens   | by the USPTO to process)  g gathering, preparing, and  me you require to complete  artment of Commerce. P.O. |                       |

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.